wedi

ANNUAL SPRING CONFERENCE
SHINING A SPOTLIGHT ON HEALTH IT SOLUTIONS

MAY 22-25, 2023
VIRTUALLY ON ZOOM
REGISTER AT WEDI.ORG

Agenda
Subject to Change, All Times Eastern

Monday, May 22, 2023

10:00am – 12:00pm

WEDI Workgroup/ Sub workgroup Meetings

Our workgroups collect input exchange ideas and make recommendations that inspire impact and far-reaching change in our industry. Open to members and non-member who have registered for the conference, we invite you to join these discussions and provide your professional insight and perspective to health IT's most pressing needs.
10:00am – 11:00am: Provider Information Sub Workgroup
11:00am – 12:00pm: Remittance Advice & Payment Sub Workgroup
(More workgroup meeting times will be posted soon)

12:00pm – 1:00pm

Panel: Standards Development and Operating Rules Organization Updates

WEDI invites conference attendees to attend this important spotlight as SDOs (Standard Development Organizations) and Operating Rules Entities offer updates on their activities and address any questions from the audience. Learn more about these organizations; their activities, workgroups, products, and how to participate. Be an agent of change for the healthcare industry and work with these great organizations.
Expected participants: X12, Da Vinci, NCPDP and CAQH CORE

1:00pm – 1:30pm

X12 Proof of Concept Updates

X12's Proof of Concept (POC) Program was created to verify the expected business benefits of these new versions and transactions are achievable, identify unforeseen obstacles and adjust accordingly, and establish baseline of expected implementation cost. Learn about Optum's participation and their execution.
Tara Rose, Capability Manager, OptumInsight

1:30pm – 3:00pm

Electronic Attachments Innovators- Early Adopters Crossing the Chasm

Join this session to learn about the experiences and lessons learned from innovators and early adopters of the X12 275 Claim Attachment and Prior Authorization Attachment transactions. Learn how these organizations obtained executive buy in, how they implemented the

solutions, the value received by payers, provider's, and clearinghouses and how your organization can participate in these payer electronic attachment initiatives

- **Sherry Wilson, Executive Vice President, Chief Compliance Officer, Jopari**
- **Mary Lynn Bushman, EDI Agile Product Manager, National Government Services**
- **Christol Green, e-Solutions Senior Business Consultant/ Advisor, Elevance Health**
- **Rhonda Sapereira, Senior Product Manager, Optum**
- **Eva Ndreko, Senior Associate, athenahealth**
- **Crystal Ewing, Director of Product Management, Waystar**
- **Sofia Fayazdeen, Product Director, EDI Product, UnitedHealth Care**
- **Clay Taylor, Senior Provider Connectivity Professional, Humana**
- **Rosemarie Hodges, Product Lead, Aetna**

Tuesday, May 23, 2023

10:30am – 11:00am   WEDI Kickoff. Workgroup Spotlight (Workgroup To Be Announced)

11:00am – 11:45am

How Regulations, Data and Innovation will Impact Our Industry

In a season of "raining regulations" WEDI invites experts from key stakeholder groups to discuss how the latest federal data exchange proposed rules, guidance, and initiatives including interoperability, prior authorization, attachments, TEFCA and the No Surprises Act will impact our industry. How are payers, providers and patients preparing to meet these challenges and more importantly, how will these government requirements improve health information exchange, enhance care quality, reduce cost, and improve the patient experience.

- **Michelle Hood, Executive Vice President, Chief Operating Officer, American Hospital Association**
- **Danielle Lloyd, Senior Vice President for Private Market Innovations & Quality Initiatives, America's Health Insurance Plans**
- **Hans Buitendijk, Executive Committee, Electronic Health Record Association, Director of Interoperability Strategy, Oracle Cerner**
- **Rebekah Angove, PhD, Executive Vice President, Research and Evaluation Director, Patient Advocate Foundation**
- **Host: Ed Hafner, Board Chair, WEDI, AVP, Payer Strategy, Change Healthcare**

11:45am – 12:30pm	**Driving Innovation and Solutions at CMMI** The Center for Medicare & Medicaid Innovation (the Innovation Center) with CMS supports the development and testing of innovative healthcare payment and service delivery models. We welcome CMMI's Director Elizabeth Fowler, PhD, JD to discuss the successes and challenges of the center as it aims to achieve better care for patients, better health for our communities, and lower costs through improvement of our health care system. • **Elizabeth Fowler, PhD, JD, Deputy Administrator and Director of the Center for Medicare & Medicaid Innovation**
12:30pm – 1:00pm	**Track: Raining Regulations and Technology Solutions** Prior Authorization Primer • **Alexandra Mugge, Director and Deputy Chief Health Informatics Officer, Health Informatics and Interoperability Group, Centers for Medicare & Medicaid Services**
1:15pm – 2:00pm	**Track: Raining Regulations and Technology Solutions** Prior Authorization NPRM, An Interactive Technical Discussion • **Denny Brennan, Executive Director, Massachusetts Health Data Consortium** • **Durwin Day, Health Information Manager with Health Care Service Corporation (HCSC)** • **Robert Dieterle, CEO, EnableCare Group LLC** • **Moderator: Robert Tennant, Vice President, Federal Affairs, WEDI** **Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience** Creating Consistent Success and Solutions in Value Based Care • **James Dom Dera, MD, Medical Director, New Health Collaborative** • **Rick Foerster, Senior Vice President, Value-Based Care, Privia Health**
2:15pm – 3:00pm	**Track: Raining Regulations and Technology Solutions** A Look at the ONC Proposed Rule Recently, the U.S. Department of Health and Human Services' (HHS) Office of the National Coordinator for Health Information Technology (ONC) released a Notice of Proposed Rulemaking (NPRM) for public comment on proposals to implement certain provisions of the 21st Century Cures Act (Cures Act) and make several enhancements to the

ONC Health IT Certification Program (Certification Program) to advance interoperability, improve transparency, and support the access, exchange, and use of electronic health information. We welcome ONC to address the proposal including the key provisions and how the proposal could serve as the next step to advancing the care continuum through technology and interoperability.

- **Jeff Smith, Deputy Director, Certification & Testing Division, ONC**
- **Michael Lipinski, Division Director of Regulatory Affairs, ONC**

Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience

Health Data Utilities (HDU): A New Pillar of Public Health

Health information exchanges (HIEs) are widespread across the country, with most experts touting them as central to healthcare's mission for health data interoperability and integration. Reshaping the nation's HIEs as state-designated health data utilities (HDUs) offers distinct advantages for public health. We welcome Civitas Networks for Health to offer more information about HDUs- implementation, benefits, challenges and case studies.

Jolie Ritzo, Senior Director, Network Engagement, Civitas Networks for Health

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3:15pm – 4:00pm

edifecs

Track: Raining Regulations and Technology Solutions

Interoperability is Foundational to Accelerating Value-Based Payments

Educational Session Presented by Edifecs
Successful value-based care model implementation is only possible through technology that supports standards-based interoperability. The ability to effectively exchange and use electronic health information, including attribution, quality measures, and interim performance reporting in a timely and meaningful manner is the key to enabling and evolving value-based arrangements. Without it, organizations will experience significant and potentially costly friction in their operations, and with their partners.

- **Michael Pattwell, Principal Business Advisor, Edifecs**
- **Michael Phillips, Senior Manager, CAQH CORE**

Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience

Putting the SDOH FHIR Implementation Guide into Practice: Updates from The Gravity Project

The Gravity Project, an HL7 FHIR accelerator, is developing standards for the collection of data related to food security, housing stability, and transportation access. The Project's Pilots Affinity Group is envisioned

as a peer-to-peer learning forum for entities participating in the real-world testing of Gravity terminology and technical standards. Each participating pilot serves as a feasibility study or experimental trial launched on a relatively small scale to help an organization learn how a large-scale project might work in practice. We welcome two pilot participants represents major US cities, to discuss their real-world experience.

- **Andrew Hamilton, Chief Informatics Officer, Deputy Director, Alliance Chicago**
- **Asfiya Mariam, HIE Policy Analyst, Health Care Reform & Innovation Administration, District of Columbia Department of Health Care Finance**
- **David Poms, Partnership Manager, DC Primary Care Association**
- **Moderator, Vanessa Candelora, Program Manager HL7 Gravity Project, Senior Consultant, Point of Care Partners**

4:15pm – 5:00pm   **Track: Raining Regulations and Technology Solutions**

A Conversation with NCVHS Standards Sub Committee

The Subcommittee on Standards monitors and makes recommendations to the Full Committee on health data standards, including implementation of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Medicare Modernization and Improvement Act of 2006 (MMA), the Affordable Care Act and associated areas of focus such as interoperability. Join in the conversation about the opportunities and issues in health care data standards under HIPAA and ACA and the NCVHS roadmap for 2023.

Attendees will leave the sessions with a better understanding of:
- NCVHS and its role with health data standards
- 2023 roadmap priorities - opportunities and issues in health data standards, e.g.,
  - X12 standards
  - CAQH CORE operating rules
  - Informing the transition to ICD-11
- How you, your organization and WEDI's contributions inform recommendations.

- **Tammy Banks, NCVHS Subcommittee on Standards Co-Chair**
- **Jamie Ferguson, NCVHS ICD-10 Workgroup Co-Chair, Member at Large, Standards Subcommittee**

4:15pm – 5:00pm   **Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience**

WEDI Spotlight on Health IT Startups

Healthcare has always been one of the top priorities for research and investment. Healthcare technology remains a challenging industry based on longtime practices and assumptions. Aiming to transform everything from patient care to interoperability, WEDI is proud to highlight startups making significant waves in the industry. Following the presentation, we will further discuss healthcare startups at a time of raining regulations and increased patient empowerment.

- **Presentation #1:** *Achieving Equitable ROI with Social Determinants of Health Data and AI/ML*, **Carol McCall, Chief Health Analytics Officer, ClosedLoop.ai**
- **Presentation #2:** *Powering Privacy-Centric Interoperability,* **Dan Wilson, Founder & CEO, Moxe Health**
  With a focus on patient confidentiality, Moxe unlocks access to timely, precise clinical data. We deliver meaningful, actionable data that's purpose built for payer and provider use cases.

Wednesday, May 24, 2023

10:00am – 10:30am	**WEDI Kickoff. Workgroup Spotlight: Remittance Advice & Payment: 835 Changes in the Next Version- RAS Segment** The next version of the 835 transaction includes changes in how adjustments are reported in the file, including the whole new segment. Join us to learn some details about these changes and the impacts to payers and providers using the transaction.
10:30am – 11:15am	**Updates from the National Coordinator for Health Information Technology** **Micky Tripathi, PhD**, National Coordinator for Health Information Technology, US Department of Health and Human Services
11:15am – 12:00pm	**TEFCA, QHINs, and the Future of Healthcare Interoperability** (pre-recorded) • **Moderator: Zoe Barber, Policy Director, The Sequoia Project** • **Therasa Bell, President and CTO, Kno2** • **Dave Cassel, SVP, Customer Success & Operations, Health Gorilla** • **Matt Doyle, Software Development Lead for Interoperability, Epic** • **Laura McCrary, CEO, KONZA** • **Jay Nakashima, Executive Director, eHealth Exchange** • **Paul Wilder, Executive Director, CommonWell Health Alliance**
12:00pm – 12:15pm	Conference Break

12:15pm – 1:00pm

Track: **Raining Regulations and Technology Solutions**

Risk Adjustment Reporting and Feedback at the Point of Care

Leverage Da Vinci Risk Adjustment implementation guide to support exchange of risk adjustment gap reports at the point of care. This session will cover how standard protocols which are payer agnostic enable communication of chronic conditions and simplified workflows. Providers gain ability to share real-time feedback and clinical evidence to address risk adjustment gaps.

- **Linda Michaelsen, Director, Healthcare Interoperability Standards, Optum**
- **Joshua Lamb, Integration Architect, Optum**
- **Nidhi Pengoria, Senior Product Manager, athenahealth**

Track: **Creating a more Engaged, Collaborative and Equitable Healthcare Experience**

The Evolution of Value Based Care for Pediatrics

Value-based care has evolved differently for pediatric versus adult systems of care and clinically integrated networks (CINs) for children's hospitals look different in nearly every market. While differences abound, pediatric CINs have had to overcome similar challenges, including how to best engage providers, how to deliver evidence-based, high-quality care, how to position the CIN to be strategically relevant in the shadow of larger adult CINs and how to evolve and sustain their networks. Over the past five years, the Pediatric Care Network (PCN) has grown its membership, executed value contracts, advanced care coordination initiatives and quality coaching to improve pediatric health across Colorado. The network has experienced and overcome many challenges along its journey and despite its early successes, still has much more to accomplish in partnership with its highly engaged and committed pediatric primary care and specialist providers.

- **Raphe Schwartz, Chief Strategy Officer, Children's Hospital Colorado**
- **Darcie Bradley, Vice President, Strategic Provider Integration, Pediatric Care Network**

1:15pm – 2:00pm

Track: **Raining Regulations and Technology Solutions**

The CAQH Index Report 2022

The CAQH Index is the industry source for tracking health plan and provider adoption of fully electronic administrative transactions and the opportunity for future savings. By benchmarking progress, industry and government can more easily identify barriers preventing stakeholders from realizing the full benefit of automation.

Kristine Burnaska, PhD, Research and Measurement, CAQH

Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience

Walking Through a "Full Lifecycle" Social Determinant of Health Program

In 2021, Priority Health launched a first-of-its-kind "full lifecycle" social determinants of health initiative with partners Socially Determined, ConsejoSano and FindHelp. The program enables the insurer to proactively identify social risk among its members, initiate culturally-resonant engagement, connect people with critical resources to address their needs, and repeatedly measure the impact to refine future programs. We welcome members of this program to offer background information, updates and lessons learned on this ambitious initiative.

- **Joe Solicito, Customer Happiness Executive, FindHelp**
- **Ryan Bosch, MD, President and Co-Founder, Socially Determined**
- **Chris Talley, Director, Strategic Solutions, Socially Determined**
- **Shannon Wilson, Vice President, Population Health & Health Equity, Priority Health**

2:15pm – 3:00pm

Track: Raining Regulations and Technology Solutions

Prior Authorization Solutions in Action: HL7 CodeX Pilot Testing PA in Oncology

CodeX is a member-driven HL7 FHIR Accelerator hosting a growing, vibrant, community working together to enable FHIR based interoperability that drives substantial improvements around the most important challenges and opportunities in patient health in clinical care spaces. The CodeX PA in Oncology Use Case Pilot seeks to simplify Prior Authorization in Oncology. The FHIR Accelerator will test HL7's mCode and Da Vinci Standard Implementation Guides (CRD, DTR, PAS) to enable an automated prior authorization workflow in a real-time setting.

- **Maxim Abramsky, Associate Vice President of Product Management, Prior Authorization, Edifecs**
- **Ellen Anderson- White, Enterprise Architect, Evernorth**

Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience

Using Accurate Customer Data to Create a Frictionless Patient Experience

Identifying and resolving member pain points is vitally important to customer retention, engagement, and overall growth. Learn about best practices for measuring customer satisfaction across product lines and engagement channels including call, chat, website, and app. Dive into how to amplify the voice of the customer as a key input to improving processes across operational, digital, marketing, and IT teams as you deliver a simplified, personalized customer experience.

Jonathan Burow, Vice President Customer Experience & Digital Transformation, Independent Health

3:00pm – 3:30pm	**Track: Raining Regulations and Technology Solutions**

Attachments at the Convergence of EDI and FHIR
Tech Showcase Presented by Edifecs

- **Kevin Day, Principal Business Advisor, Edifecs**
- **Sergiu Rata, AVP Product Management, Edifecs**

3:15pm – 4:00pm	**Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience**

Advancing a Health Data Safety Net Starting with ADT Notifications

Nonprofit health information organizations (HIOs) can serve as health data safety nets, using digital tools to address disparities in health outcomes. And some of the simplest data – like ADT notifications – can have the most significant impact, setting into motion a series of events and processes – again, some as simple as a follow-up phone call after discharge – that can streamline care coordination, reduce costly readmissions, and most importantly – improve outcomes and access for all patients.

Learning Objectives:

- Understand the impact of ADT notifications on timely communication and care coordination between public health agencies, hospitals, and health care providers vs. traditional methods of faxing or calling
- Explain what a health data utility model is and how sharing the same "slices" of health data universally (e.g., clinical, SOGI, SDOH, race and ethnicity) helps achieve the Quadruple Aim, advance health equity, and support public health
- Describe why we need a health data safety net and how health equity for patients starts with digital equity for providers

Mimi Hall, Vice President Public Health Innovation, Manifest Medex

3:30pm – 5:00pm	**Track: Raining Regulations and Technology Solutions**

WEDI Workshop: Debunking the Myths of the CMS Enforcement Process

- **Michael Cimmino, Director National Standards Group, Office of Burden Reduction and Health Informatics, CMS**
- **Daniel Kalwa, Deputy Director, National Standards Group, Office of Burden Reduction and Health Informatics, CMS**
- **Beth Karpiak, Health Insurance Specialist, CMS**

- **Jami Lookabill, Deputy Director, Division of Enforcement Actions, CMS**
- **Paul Anderson, Health Insurance Specialist, CMS**

4:15pm – 5:00pm	**Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience**

SDOH Data Drive Efforts to Reduce Breast Cancer Disparities

Access to potentially life-saving mammograms is more difficult for women who face with social determinants of health such as low-income, lack of transportation or the inability to take time off from work. In Dallas, Parkland Hospital & Health System is focused on reducing cancer disparities by addressing these health-related social needs.

Teresita Oaks, Director, Community Health Program, Parkland Health

Thursday, May 25, 2023

10:30am – 11:00am	

WEDI Claims Sub workgroup Meeting

Are we doomed to repeat difficulties of past implementations? **NO!!** This morning's Claims Sub workgroup continues to assemble *Lesson Learned from the 5010 Implementation.* The group is working on a white paper as an aid for the industry, suggesting implementation considerations as we collaborate as we collaborate on the move into the world of X12 v80NEXT Standards. This promises to be an insightful discussion, aimed at leveraging the experience of prior conversions.

11:00am – 11:45am	

Provider and Payer Approaches to Addressing Health Disparities

Health equity is increasingly a priority for providers, and insurers can be a key partner in supporting those efforts. Learn how Mayo Clinic and UnitedHealth Group are working to reduce barriers, eliminate disease and support health and digital literacy.

- **U. Michael Currie, Chief Health Equity Officer, UnitedHealth Group**
- **Adam Milam, MD, PhD, Medical Director, Office of Health Equity and Inclusion, Mayo Clinic**
- **Ajay Jayakumar, Director, Strategy and Analytics Diversity Science, Mayo Clinic**
- **Marquita Davis, Enterprise Director, Office of Health Equity and Inclusion, Mayo Clinic**

11:45am – 12:30pm	Digital Identity Federation in Health Care: The CARIN Alliance and Department of HHS Digital Identity Proof of Concept

Our challenges with patient matching are directly related to individuals not having a portable, digital identity credential they can use across multiple different data holders. Over the last year, the CARIN Alliance and FAST worked with HHS, CMS, ONC, and more than 25 private sector partners including health systems, payers, third-party applications, and trust framework organizations to test the largest and most comprehensive digital identity ecosystem open framework. We will be sharing a report that describes our lessons learned, best practices, and next steps for how we can have a fully interoperable, voluntary, federated digital identity ecosystem in health care as we move to a modern identity and access management ecosystem that supports OpenID Connect.

- **Moderator: Ryan Howells, Principal, Leavitt Partners**
- **Deven McGraw, Lead, Data Stewardship and Data Sharing, Invitae**
- **Bo Holland, Founder and CEO, AllClear ID**
- **Wes Tuberville, Senior VP, Federal, ID.me**
- **Max Templeton, Principal Architect, Cambia Health Solutions**
- **Julie Maas, Founder and CEO, EMR Direct, Co-Lead FAST Identity Team**
- **Adam McBride, XMS Program Manager, US Department of Health and Human Services (HHS)**
- **Darren Mann, Interoperability Director, Intermountain Healthcare**
- **Kyle Neuman, Director, Trust Framework Development, DirectTrust**

12:30pm – 12:45pm	Conference Break

12:45pm – 1:30pm	**Track: Raining Regulations and Technology Solutions**

FHIR Server Implementation End-Point Lessons Learned

With the recent final and proposed regulations addressing interoperability and prior authorization, understanding the challenges of setting up a successful FHIR server is critical. This session focuses on lessons learned from United Healthcare's Lukasz Nosol. Lukasz shares experiences of creating multiple application FHIR end-points.

Lukasz Nosol, Senior Director Software Engineering, Optum

Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience

Advancing Health Equity Through Alternative Payment Models

- **Marshall Chin, MD, Co-Chair, Health Care Payment Learning & Action Network, Health Equity Advisory Team. Richard Parrillo Family, Professor of Healthcare Ethics, University of Chicago**
- **Karen Dale, Co-Chair, Health Care Payment Learning & Action Network, Health Equity Advisory Team. Market President, AmeriHealth Caritas.**
- **Moderator: Michael Pattwell, Chair, WEDI Payment Models Workgroup, Principal Business Advisor, Edifecs**

1:45pm – 2:30pm

Track: Raining Regulations and Technology Solutions

An Introduction to the Value-Based Performance Reporting HL7® FHIR® Implementation Guide

The HL7® Da Vinci Project has initiated a new HL7 FHIR® use case to support and integrate value-based care data exchange in real time. This session outlines what problem the use case is solving and how the Implementation Guide will support standard value-based performance reporting for quality and risk contracts.

- **Michael Pattwell, Principal Business Advisor, Edifecs**
- **Semira Singh, Director, Population Health Informatics, Providence Health**

Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience

Game Changer: Updates on California's State Data Exchange Framework

California's Health and Human Services Data Exchange Framework is a first-ever, statewide data sharing agreement that will accelerate and expand the exchange of health information among health care entities, government agencies, and social service programs beginning in 2024. We welcome back the state of California's Chief Data Officer and the Center for Data Insights in Innovation to offer updates, lessons learned and next steps in the process.

John Ohanian, Chief Data Officer- Center for Data Insights and Innovation, State of California Health and Human Services

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2:45pm – 3:30pm

Track: Raining Regulations and Technology Solutions

The Nation's First Prior Auth Automation using HL7® Da Vinci Fast Healthcare Interoperability Resource (FHIR®) IGs.

An education session presented by MCG

In this case study, Heidi Kriz, MPH, RD, the Director of Medical Policy and Medical Management at Regence Health Plans, and Raj Godavarthi, AVP of Technology & Interoperability at MCG Health, will discuss how new automation technology can be applied to reduce the burdens of

prior authorization for healthcare payers and providers. These two interoperability subject matter experts are members of the HL7® Da Vinci Project and will provide an overview of prior auth automation solutions they co-implemented last October with a provider. This overview will include success metrics such as time savings, improved payer-provider communication, increased accuracy of clinical documentation.

Learning Objectives:

- Examine the process and implementation needs to establish why this process should begin now to prepare for the forthcoming CMS Final Rule
- Analyze the lessons learned from implementing scalable prior authorization automation
- Identify what real-world measurements help constitute a successful prior auth automation program
  - **Heidi Kriz, Director of Medical Policy and Medical Management, Regence Health Plans**
  - **Raj Godavarthi, Associate Vice President of Technology & Interoperability, MCG Health**

2:45pm – 3:30pm	**Track: Creating a more Engaged, Collaborative and Equitable Healthcare Experience**

Patient Advocate Roundtable

Regulations, innovation, emerging technologies. There's a lot going on in healthcare right now, how are these initiatives affecting the end user, the PATIENT? We welcome patient advocate leadership from major organizations to discuss what healthcare "nirvana" would look like and how close is the work of payers, provider and vendors to hitting that target.

- **Andrew Scholnick, Government Affairs Director, AARP**
- **Melissa Williams, Director of Grassroots Advocacy and Partnerships, National Patient Advocate Foundation**
- **Anna Hyde, Vice President of Advocacy and Access, Arthritis Foundation**
- **Nicole Purcell, Senior Director, Clinical Practice, Alzheimer's Association**
- **Moderator: Grace Vinton, Patient Advocate, Host, HITea with Grace Podcast**

3:45pm – 5:00pm	**Track: Raining Regulations and Technology Solutions**

WEDI Workshop: How Can WEDI Help the Industry in Implementing the new PA and Attachment Regulations?

3:45pm – 4:30pm

Hixny

Addressing Social and Clinical Needs in One Visit: It's Possible with FHIR

An education session presented by Hixny

Navigating a complex system of constantly changing availability and eligibility has made it difficult for clinical providers to get patients help with health-related social needs (HRSN). Using FHIR technology, Hixny—in partnership with Healthy Alliance—has developed a solution that removes barriers so providers can assess needs, view social history and refer patients to community-based and social care organizations. During this session, attendees will learn how FHIR technology has allowed Hixny to provide a "no wrong door" opportunity for clinical providers to screen their patients for HRSN and make appropriate referrals.

- **Mark McKinney, Chief Executive Officer, Hixny**
- **Julia Prusik, Manager of Product Development, Hixny**
- **Lynne Olney, Chief Transformation Officer, Healthy Alliance**
- **Mark Freiberger, Deputy Director and Paramedic, Clifton Park Halfmoon EMS**
- **Moderator: Jolie Ritzo, Senior Director, Network Engagement, Civitas Networks for Health**

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